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Tax Deposit Refund and Transfer Request

3581

For calendar year _____ or fiscal year beginning month _____ day _____ year _____, and ending month _____ day _____ year _____.

Name(s) as shown on tax return

Your SSN or ITIN

Your Spouse's/RDP's SSN or ITIN

Address (including number and street, suite, room, PO Box, or PMB no.)

FEIN

City

State

Zip Code

CA Corporation no.

Secretary of State (SOS) file number

Explanation of Requested Action. Indicate type of tax, tax deposit payment, and date of the payment. Also, make sure to mark the requested action. To transfer all or part of a tax deposit payment to another taxable year, enter the amount and the taxable year it should be applied to.

Make sure to complete all applicable fields:

- Type of Tax: _____ Personal Income Tax _____ Corporate Tax _____ LLC Fee _____ LP, LLP, REMIC
- Tax deposit payment \$ _____
- Date of payment: _____
- What is the requested action? _____ Refund _____ Transfer to another taxable year _____ Convert deficiency administrative action to action on a refund claim.
- Amount to be refunded \$ _____
- Amount \$ _____ to be transferred to _____ taxable year.

**Please
Sign
Here**

Signature of individual, owner, officer, or authorized representative and title

Date

If joint return, spouse's/RDP's signature (it is unlawful to forge a spouse's/RDP's signature)

Date

What's New

For purposes of California income tax, references to a spouse, a husband, or a wife also refers to a Registered Domestic Partner (RDP) unless otherwise specified. For more information on RDPs, get FTB Pub 737, Tax Information for Registered Domestic Partners.

A Purpose

Use form FTB 3581, Tax Deposit Refund and Transfer Request, to request the refund, or the transfer of all or part of a **tax deposit** payment.

In general, you can request the refund or the transfer of a tax deposit at any time before the Franchise Tax Board applies the deposit amount to satisfy a final tax liability.

If you use this form to transfer a tax deposit to another taxable year before there is a final tax liability for that year, you must file a separate form FTB 3581 for that year if you wish to convert any pending deficiency protest or appeal to a claim for refund.

B How to Complete Form FTB 3581

To ensure timely response and proper application of your request, enter all the applicable information requested on the form.

Make sure to enter:

- The four-digit taxable year in the box at the top of the form, and complete the first line as applicable.

- The social security number(s) (SSN)/Individual Taxpayer Identification Number(s) (ITIN).
- The California corporation number, Secretary of State (SOS) file number, or Federal Employer Identification Number (FEIN).
- The tax deposit payment, the amount to be refunded, and/or the amount to be transferred to another taxable year.

Private Mail Box

Include the Private Mail Box (PMB) in the address field. Write the acronym "PMB" first, then the box number. Example: 111 Main Street PMB 123.

C Where to File

Submit a **separate form** FTB 3581 for each taxable year.

For **individuals**, mail this form to:

FRANCHISE TAX BOARD
PO BOX 942840
SACRAMENTO CA 94240-0040

For **Corporations, LPs, LLPs, REMICs, or LLCs**, mail this form to:

FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540